| <b>č</b>   |                   |                                |             | 10                           | 661             | 24                  |                        |  |
|--|-------------------|--------------------------------|-------------|------------------------------|-----------------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD  |                   |                                |             | Application or Docket Number |                 |                     |                        |  |
| PAPENT APPLICATIO  |                   | 10/1061, 244 14                |             |                              |                 |                     |                        |  |
| (Column 1) (Column 2)  |                   |                                |             | LENTITY                      | OR              | OTHER               | -                      |  |
| TOTAL CLAIMS 14  |                   |                                | RAT         | E FE                         |                 | RATE                | FEE                    |  |
| FOR NUMBER FILED NUMBE   |                   | NUMBER EXTRA                   | BASIC       | FEE 375.                     | <sup>∞</sup> OR | BASIC FEE           | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS minus 20= 14   |                   | • 14                           | <b>X</b> \$ | 9=                           | OR              | X\$18=              |                        |  |
| INDEPENDENT CLAIMS minus 3 =   |                   | • 1                            | X4:         | 2=                           | OR              | X84=                |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |                   |                                | +14         | 0=                           | OR              | +280=               | ;                      |  |
| * If the difference in column 1 is less than zero, enter *0" in column 2   |                   |                                |             | AL                           | OR              | TOTAL               | TRA                    |  |
| CLAIMS AS AMENDED - PART II OTHER THAN   |                   |                                |             |                              |                 |                     |                        |  |
| (Column 1)   | (Colu             | mn 2) (Column 3)               | SMA         | ALL ENTIT                    |                 | SMALL               |                        |  |
| CLAIMS REMAINING AFTER AMENDMENT   | NUA<br>PREVI      | HEST ABER PRESENT OUSLY EXTRA  | PA*         | ADI<br>TE TION               | IAL             | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| AFTER AMENDMENT  Total   | Minus - 2         | D -                            | X\$         | 9=                           | OR              | X\$18=              | / .                    |  |
| Independent .  | Minus ***         | 3 -                            | X4:         | 2=                           | OR              | X84≂                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                   |                                |             | 0=                           | OR              | +280=               |                        |  |
|  |                   |                                |             | OTAL                         |                 | TOTAL<br>ADDIT, FEE |                        |  |
| ADDIT. FEE   |                   |                                |             |                              |                 |                     |                        |  |
| CLAIMS REMAINING AFTER AMENOMENT   | NUI<br>PREV       | MEST MBER PRESENT MOUSLY EXTRA | RA          | ADI                          | VAL             | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| Total • Q  | Minus **          | <del>20</del>   -              | XS          | 9=                           | OR              | X\$18=              | )                      |  |
| Total • C Independent • C  | Minus ***         | 3 - (                          | X4          | 2=                           | TOR             | X84=                |                        |  |
| FIRST PRESENTATION OF M  | IULTIPLE DEPENDEN | IT CLAIM                       | +14         | 10=                          | OR              | +280=               |                        |  |
|  |                   |                                |             | OTAL                         | OR              | TOTAL<br>ADDIT. FEE |                        |  |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)  |                   |                                |             |                              |                 |                     |                        |  |
| CLAIMS<br>REMAINING  | HIG<br>NU<br>PREV | MBER PRESENT<br>(OUSLY EXTRA   | RA          | TE TION                      | VAL             | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| X Total +  | Minus **          | =                              | XS          | 9=                           | OR              | X\$18=              |                        |  |
| AFTER AMENDMENT  Total • Independent • FIGST PRESENTATION OF   | Minus •••         | =                              | 1 -         | 2=                           | OR              | X84=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                   |                                |             |                              | _               |                     |                        |  |
| .* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                   |                                |             | OTAL                         | OR              | +280=               |                        |  |
| "If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE                                     |                   |                                |             |                              |                 |                     |                        |  |
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